

Behavioral Health Consortium Quarterly Meeting

Date and Time: 01/13/21 Location: Virtual Meeting

Attendees: Sandra Gibney, Hansen, Lt. Governor, Dave Humes, Traci Bolander, Wade Jones, Carolyn Petrak, Tamera Fair, Rebecca King, Avani Virani, Dr. Thomas, Jennifer Smolowitz, Emily Vera,

Topic: Welcome and Introductions

Review of previous meeting notes: Lt. Governor welcomed the group and acknowledged the current climate and the hope that the vaccine brings. She noted the critical work that the consortium continues to do and will do in the upcoming year. She asked for the approval of the meeting minutes. Dave Humes noted that attendees weren't included in the minutes. The Lt. Governor noted that they will be added. Dave Humes brought a motion to approve the meeting minutes which were then approved by the Consortium.

Discussion/Comments

Angie Demby shared her story of loss of her sons; one to gun violence and one to substance abuse. She created her foundation as a way to assist with people are experiencing the same things. Her foundation is the amendfoundation.org.

Topic: (1) Consortium Reset Presentation

Presenter: Lt. Governor stated that good work that the consortium has done and continue to do. The co-chairs had meetings with BHC Leadership to establish more direct goals for the committees for the first quarter. She noted that we will not be losing the goals from the original plan but are having a more focused look at them in order to have measurable success.

Mary Kane presented on the consortium reset. She detailed the process of working with the co-chairs to learn about success and opportunities for improvement among the committees. She also introduced a process for working through the committee tasks. She also outlined the committee tasks for the first quarter. Also noted that there is a plan to send out a combined calendar with all the dates for the consortium and the committees. There is a document portal in the works that would aid in creating more access to consortium and committee documents. The presentation has been sent out and is available by request (Sydney.garlick@delaware.gov)

Next steps: Committees adopt the decision making structure to get support and/or funding from BHC for its recommendations.

Topic: (2) EP10 Workgroup Presentation

Presenter: Sandra Syglowski shared her presentation on the Education and Prevention's task of implementing a mental health screener. The Committee formed a workgroup to help address this issue. The workgroup was led by Sandra and Kierra. The first thing they did was establish the population of focus which was determined to be youth aged 10-13 due to statistics that indicated that this group would be ideal to do prevention. They created a shared definition of mental health screening and the importance of it. The group is at a crossroads because implementation would require funding and agency assistance. They are unsure of how to move forward in their task and asked the consortium for guidance.

Their presentation was sent out and available by request.

The co-chairs of the Data and Policy Committee discussed that the group could meet to discuss with their committee to further discuss this.

It was also discussed that there may need to be a meeting with agencies and others to go over the state initiatives that may overlap with this task.

Next Steps:

EP will meet with the co-chairs from the Data and Policy Committee

EP seeks input interested parties to determine what efforts are currently occurring.

EP drafts recommendations to put in front of BHC for feedback and support.

Topic: (3) Committee Updates

Access and Treatment: (Dr. Gibney)

The committee has identified goals for our subcommittee and are working on identifying the right membership to truly dig in and make the meetings modeled as a working group. Dr. Gibney is hopeful that we will have that solidified this week and then this year's meetings will be scheduled.

Corrections and Law Enforcement(Lt. Sawchenko):

There has been growth in the areas of training for law enforcement; mental health first aid, CIT training. Also noted that they are working with Valarie Tickle of the Criminal Justice Council to identify grant funds for care managers. Diversion is occurring and moving forward with the state troops. But noted that more resources and time are needed to really get things done.

Changing Perceptions (Dave Humes):

The committee continues to increase knowledge of "help is here" website and resources. They continue to educate legislators. They have been looking at ways to improve access to technology which the opioid impact fund could be used to do. On the legislative side looking at the ban the box and Good Samaritan law legislation

Data and Policy (Carolyn Petrak):

Last month the committee had a good discussion on the mental health parity report in which Tim Clements provided insights on the gaps and possibly remedies. Carolyn Petrak also noted the closure of BH facilities in the state and how this may become a trend and wanted to make sure the group is aware. Focusing on ensuring the committees have the political and data support to see it to fruition, they also want to see the impact of previous legislation that the Consortium has passed to see that there is an impact.

Education and Prevention:

At the previous meeting, the committee heard from Sandra and Kiera on mental health screening. The committee continues to monitor work that DPH is leading on different industries. The committee continues to have good engagement from school teachers and nurses.

Family and Community Readiness:

The Committee continues to fine tune and tweak Psychiatric Advance Directives and want to present at the next committee meeting.

Dave Humes: Shoutout to DHSS and their naloxone distribution and the funding that DSAMH provided to expand resources. Also requested to have an opioid impact fee discussion as a reoccurring agenda item for each meeting.

Topic: (4) Public Comment

Richard Kramer (advocate): As a dementia advocate, I've been attending the Family Readiness Committee mtgs. for over two years and was excited to see the proposed amendment to HB159 that would finally force implementation of legislation that was passed in 2010 only to learn at the December meeting that the Consortium was not planning to move forward on this initiative because they felt the legislation existed even if it has not been fully implemented and that the DSAAPD Dementia Friendly initiative would achieve the desired results. The Dementia Friendly initiative is not fully formed or funded and will not ensure that professional providers to the dementia community are properly trained in the special needs of those with dementia. The only profession to date that has implemented the legislation from HB159 is the CNA's who are required to obtain 6 hours of dementia specific training as a continuing education requirement for licensing. This is problematic in that CNA's are often frustrated in applying this training by doctors, nurses, therapists, and administrators who are untrained and higher up the chain of command as well as the problem facing those dealing with dementia and their care givers when they have to interact with these professional providers that are untrained. The result is the unnecessary drugging down of those with dementia creating a reduced quality of life and shortened life spans. The amendment to HB159 that was proposed would insure the legislation is implemented by specifying that these professional providers receive the proper training through continuing education requirements tied to their license to be able to provide for the special needs of those with dementia. Why can't we get this badly needed legislation implemented?

Noel Duckworth: I would just like to remind BHC members that the Delaware SHIP 2020 Annual Report was released, and that the work of the BHC is highlighted throughout. DPH and the UD Partnership for Healthy Communities is hosting another virtual roundtable discussion with stakeholders across the state on Wed. Jan. 20th from 9:30 – 11:30 am to review the report and collect feedback. People can visit www.DelawareSHIP.org for more information and to download the report. People can also register directly for the Jan. 20th roundtable by going to: <https://udel.zoom.us/meeting/register/tJ0od--pqD0jH9OVaOjfJX9jRcLjcF8qgo7K>. Additional feedback/comment can be sent to info@DelawareSHIP.org.

Harris Marx: Good news and bad news. The good news is that another National Organization has opened a Chapter in Delaware, SARDAA. SARDAA stands for Schizophrenia and Related Disorders Alliance of America and includes Bipolar and other Brain Disorders. I have been appointed Executive Director of SARDAA Delaware (Volunteer, non-paid position initially). Nationally, SARDAA works closely

with NAMI and MHA sending and receiving referrals and I look forward to doing the same in Delaware, as well as working with other organizations and Government entities.

The bad news is that suicide rates have spiked in Delaware, as well as the rest of the country. Every 40 seconds someone commits suicide in this country. WE NEED TO DO SOMETHING ABOUT THIS. World Suicide Prevention Day is an awareness day observed on **10 September** every year, in order to provide worldwide commitment and action to prevent suicides, with various activities around the world since 2003. While there are a few events that occur in Delaware on that date, I believe that we need to hold more educational events throughout the state. When I lived in Maryland over 10 years ago, I organized 40 such educational events around the state occurring simultaneously.

COVID-19 has caused increased stress and isolation which has caused the increase in suicide rates. In my last quarterly public comment, I stated a need for outreach to the rural areas. Delaware, outside of a few cities is, basically, a rural area. We need to reach out to 10,000 individuals in the state who have behavioral health and are unserved. We need to do something otherwise we will have more deaths!

Chris Lock: noted the opening of Sean's House at UD. It has seen many students and has been an excellent resource.

Senator Stephanie Hansen: noted that she looks forward to continued partnership in determining where the Opioid Impact Fund can go toward.

Next Meeting: April 6th